Kenner Army Health Clinic

MEDICAL EVALUATION BOARD OFFICE

Integrated Disability Evaluation System (IDES) Briefing for Commanders & 1SGs

Purpose

- To provide an overview of the Army Physical Disability Evaluation System (APDES).
- To provide an introduction to the Integrated Disability Evaluation System (IDES) and eProfile.
- To inform key personnel of their responsibilities during the overall APDES.

Basic Terminology

- APDES – Army Physical Disability Evaluation System
- APDAB - Army Physical Disability Appeal Board
- ERB – Enlisted Review Brief
- EPTS – Existed Prior to Service
- FFD – Fit For Duty
- IDES – Integrated Disability Evaluation System
- MDCO- Medical Data Collection Object
- MEB - Medical Evaluation Board
- MAR2- MOS Administrative Retention Review
- MMRB - MOS/Medical Retention Board
- ORB – Officer Review Brief
- PDR – Permanent Disability Retirement
- PEBLO – Physical Evaluation Board Liaison Officer
- PEB - Physical Evaluation Board
- PPES – Physical Performance Evaluation System
- SWSP – Separation with Severance Pay
- SWOB – Separation without Benefits
- TDRL – Temporary Disability Retired List
- USAPDA – U.S. Army Physical Disability Agency

The Benefit of IDES

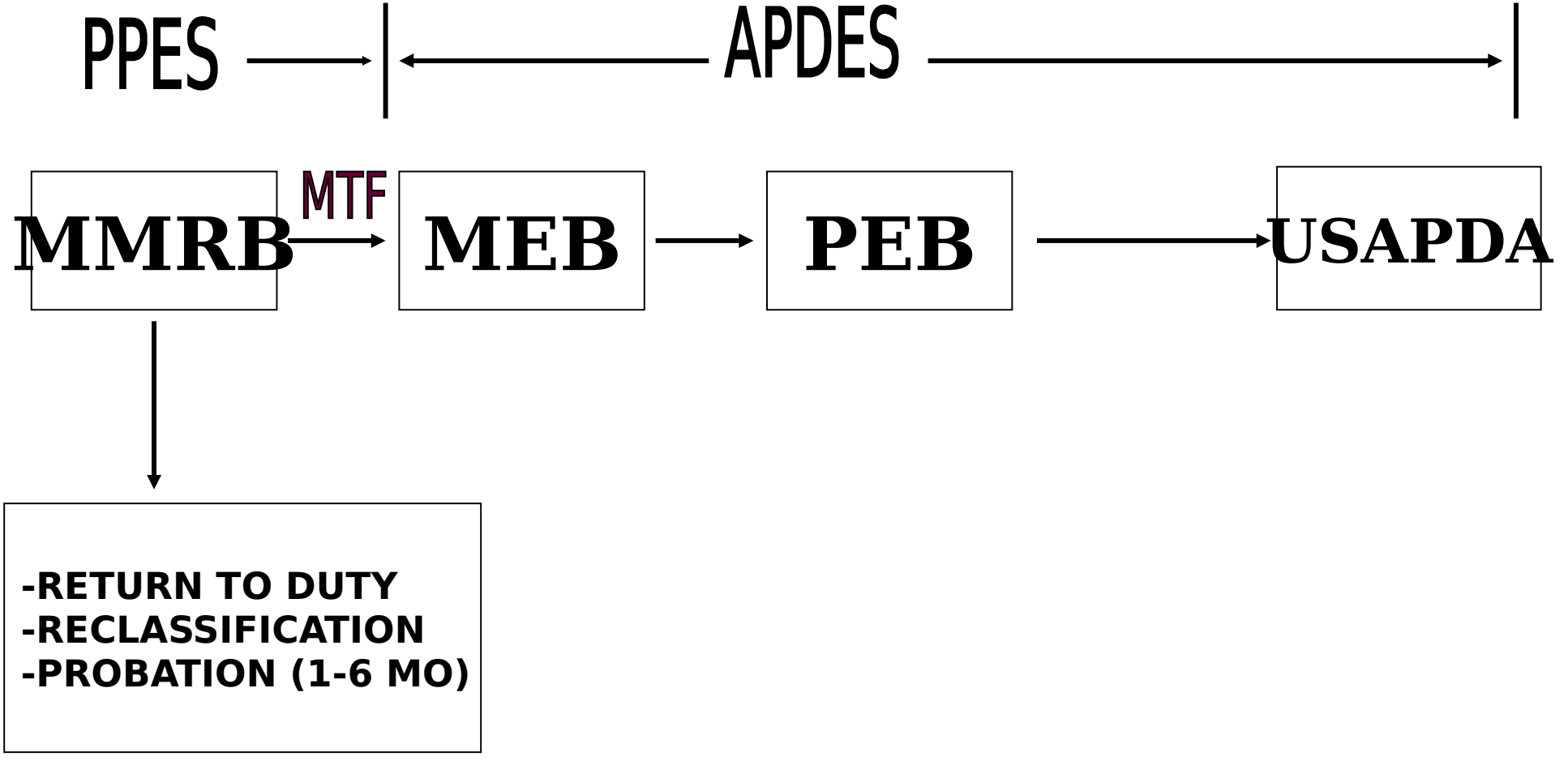
IDES Concept

An integrated DoD and VA disability system that eliminates the duplicative, time-consuming, and often confusing elements of the two current disability processes of the departments…

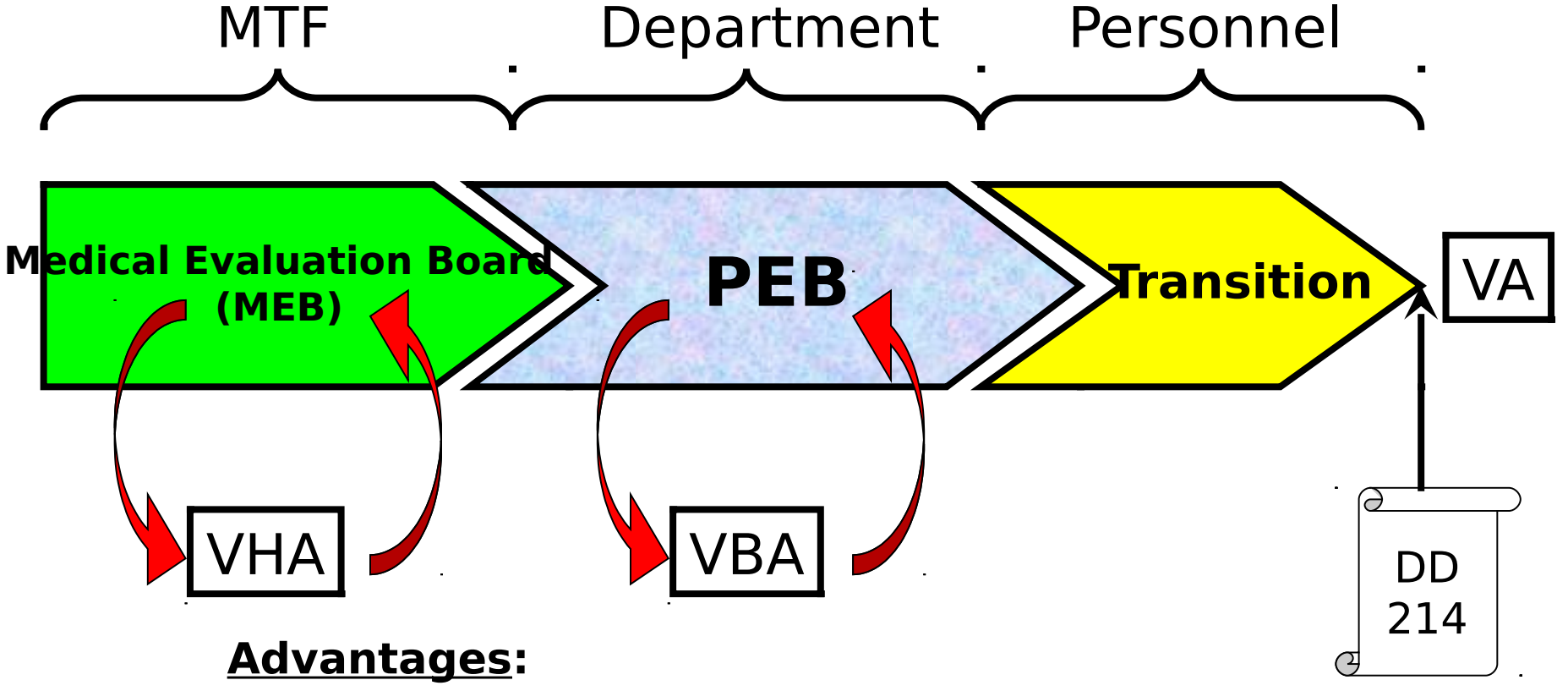
IDES Goals

- ***A single disability exam(s) conducted to VA standards that will be used by both Departments;***
- ***A single disability rating by VA that is binding upon both Departments; and***
- ***Expeditious payment of VA benefits within 30 days of a member's separation from service.***

Physical Performance/Physical Disability



IDES Strategic Overview



Advantages:

- **Single exam used by both DoD and VA**
- **DoD retains core competency: Fit/Unfit determination**
- **VA retains core competency: Provide rating percentages**
- **Delivery of both DoD and VA benefits ASAP after DD 214**

Physical Profile – DA Form 3349

- All profiles are issued electronically through eProfile since 1 Sept 2010 at Ft. Lee and Army wide since 1 Jan 2011.
- All Soldiers issued a permanent profile with a “3” or “4” in PULHES will be referred to PPES -(MMRB) or APDES.
- Permanent “3” or “4” profiles – physician needs to determine if limitation meets retention criteria IAW Ch 3, AR 40-501.
- If the Soldier meets retention criteria, MMRB is mandatory.
- If the Soldier does not meet retention criteria, entry into the physical disability (MEB / PEB) system is mandatory.
- The DA 3349 requires profiling officer to check either a MMRB or MEB / PEB box (Block 4c).

Unit/Commander Actions for Profiling

- Review profile, evaluate appropriateness, determine if soldier can perform mission required by his/her PMOS or duty assignment.
  - If a Soldier has recurrent temporary profiles, the commander may refer to a medical provider for a “fitness for duty evaluation.”
- Contact Physician to discuss profile (if needed).
- Provide the S-1/Human Resources profile data for Unit Status Report (USR) purposes. Soldiers with a P3/P4 profile should be reported unavailable for deployment/Permanent Change of Station (PCS) on USR until cleared through MMRB/PEB.

Where is Copy of the Profile?

- Through eProfile the Soldier's profile is available in:
  - Soldier's medical record
  - Unit Commander MEDPROS system
  - Soldier's AKO
- One hard copy to MPD (Military Personnel Division) or Personnel Service Center (PSC), as applicable. (For ARNGUS Soldiers, the State Military Personnel Office (MILPO)

Physical Performance Evaluation System PPES/MMRB

- **PPES – designed to evaluate Soldiers with permanent medical conditions through MMRB.**
  - Determine if Soldier can perform satisfactorily in their Primary Military Occupational Specialty (PMOS) in a worldwide field environment.
  - Provide continuity of effort among CDRs, Physicians, Personnel and the Physical Disability system.
  - Allows CDRs to evaluate the physical abilities of their Soldiers and determine if referral into the APDES is necessary.
- **Reference: AR 600-60.**

MMRB
(MOS Medical Retention Board)

- **Not a "medical board" per se – is an administrative board to determine capacity to serve in current MOS / AOC under worldwide deployable conditions.**

- **Monthly board:**
  - **O-6/BDE CDR, Field Grade Medical Officer, CSM, 2 x 1SG, Recorder w/o vote**
  - **5 Officers (if the Soldier is an officer)**

- **Possible Outcomes:**
  - **Retain, Reclassify, Trial of Duty, Refer to MEB**

- **Proceedings approved by General Court Martial Convening Authority (or designee).**

- **Soon to become the MOS Administrative Retention Review (MAR2). March 2011 will be the last month as a collective "MMRB Board".**

Medical Evaluation Board (MEB) Purpose

- The MEB Process begins when optimum medical care has been reached or when your physician determines you will not be able to return to duty.
- Designed to evaluate the Soldier's medical condition(s) to determine if they **do or do not meet the Medical Retention Standards IAW AR 40-501, Chapter 3.**
- Documents the Soldier's medical condition(s) and duty limitations.
- Refers the Soldier to the Physical Evaluation Board (PEB), when the findings and recommendations stipulate they do not meet retention standards or when referred by an MMRB.
- **Does not mean the Soldier is automatically discharged from military service.**

A Medical Board is NOT...

- A “MOS reclassification Board”

  -- reclassification is considered by the MOS/Medical Retention Board (MMRB) for Soldiers with P3 profile who meet retention standards.

- The Soldier WILL NOT sit in front of a panel of board members.

- The MEB is an **informal** process comprised of at least **two physicians** who compile, assess, and evaluate the Soldier’s medical history to determine if your duty is affected by their medical status.

Medical Evaluation Board (MEB)

- Soldier can NOT RECLASSIFY at this point.
- Informal board at the Medical Treatment Facility (MTF).
- Documents Soldier's medical status and duty limitations to determine if duty is affected by their medical status.
- Unit Commanders authorized to refer Soldiers to MTF for evaluation if Soldier cannot perform duties. This is considered "**Fitness for Duty**" evaluation
  - **memo from Soldier's Commander is required**
- References: AR 40-400, AR 635-40

MEB Recommendations
DA Form 3947

- Return to duty within profile restrictions
  - **Must have Unit Commander support**
- Trial of Duty
  - **Physician specifies time (ex: 120 days)**
- Refer to Physical Evaluation Board (PEB)

What is in a Soldier's MEB Personnel/Performance Data**

- **ERB/ORB/PQR**
- **Personnel Certificate is completed by the custodian of**
  the Soldier's 201 file (PSB)
- **Commander's Evaluation Letter**
- **NCOERs/OERs** (E-5 and above) (Last 3, if necessa
- **APFT SCORECARD** (Last 3 tests, if necessary)
- **LES** (Current End of Month)
- DA Form **4187** (Name changes, loss of rank, promotions, etc)
- **RC Soldiers have additional requirements (see next slide).

Reserve Component Personnel/Performance Data

- Orders for all active duty periods – where injury/illness incurred
- Reserves – Chronological Statement of Retirement Points

  (ARPC 249-2-E, commonly known as RPAS)
- National Guard – Retirement Points History Statement

  (NG Form 23, commonly known as F
- Approved Line of Duty (if necessary)
- 20 Year Letter if you have one

Unit Commander Actions for MEB

- Prepare a Commander's Statement **DA 7652** that includes:
  - **Description of Soldier's current duty performance (uniform, hours of work, etc.)**
  - **Special limitations of duty**
  - **Ability to adequately perform duties (PMOS)**
  - **Discuss current duty assignment, anticipated future assignments, branch, age, and career specialties**
- Complete LOD Investigation - DA Form 2173 (If Required).
- Ensure Soldier keeps all MEB (IDES) appointments.

MEB Process

- After completion of the MEB, the Soldier will be counseled and they will review the MEB findings and recommendations.
- They can consult with a lawyer from the Office of the Special Counsel (OSC) or some other advocate before signing the MEB.
- The MEB will only state the Soldier does or does not meet retention standards IAW AR 40-501, Chapter 3.
- The Soldier will receive a copy of their MEB and supporting documents for their files.

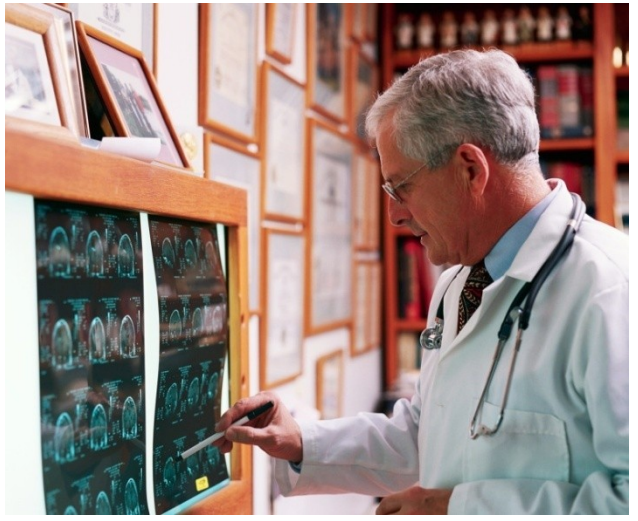
MEB Dispositions

- Generally, if the Soldier meets retention standards within the limits of their profile they are returned to duty in their MOS.
- If the Soldier does not meet retention standards, their case will be referred to the Physical Evaluation Board (PEB) for further disposition.
- If the MEB is a MOS/Medical Retention Board (MMRB) directed MEB, their case is forwarded to the Physical Evaluation Board (PEB), even though they meet retention standards. If profile is upgraded to P2 and the Soldier meets retention standards, they are RTD.

Can the Soldier appeal the MEB?

- **YES -** If the Soldier disagrees with any portion of their Medical Board, they have the right to appeal it.
- **The Soldier may request a review of their MEB by an impartial health care professional not involved in their MEB process.**
- **The physician will have 5 calendar days to review and advise the Soldier whether the MEB findings give a complete representation of their illnesses and injuries.**
- **The Soldier will have 7 calendar days to submit a written appeal stating why/what they disagree with the MEB.**
- **The OSC can assist the Soldier with their appeal.**

MEB Appeals



- The written appeal is submitted to the Deputy Commander for Clinical Services (DCCS) for further consideration. Their appeal becomes part of the MEB.

- The DCCS will have 7 calendar days to review the Soldier's appeal and make one of the following recommendations:

  -- MEB stands as written

  -- Can send back to health care provider for further information

  -- Can forward to PEB with attachments or additional notes

Is there any way the Soldier can stay in?

- YES, the **Soldier** can submit a request for **Continuation on Active Duty** (COAD) or **Continuation on Active Reserve Status (**COAR).
  - https://www.hrc.army.mil/site/protect/active/epord/coad.htm

- The MEB counselor will provide the Soldier with specific criteria/details related to requesting this.

- The Soldier can also obtain information and counseling on COAD/COAR from the OSC.

- Generally, HRC is the approval authority for most requests
  -- G-1 is the disapproval authority for Army Wounded Warrior requests.

Why Does It Take So Long???

- Additional medical conditions are discovered after referral to the MEB.
- Soldier has appeal rights to ensure due process.
- Availability of specialty consults services.
- **Awaiting personnel/performance data from command.**
- LOD investigations are not completed.
- **Soldier misses appointment.**
- Soldier requests second opinion.
- MEB returned for additional admin or clinical input.
- Case put on hold for additional surgery/rehab to ensure Soldier has reached optimal care.

Unit/Command Actions for PEB

- Ensure Soldier keeps Command updated of PEB status.
- Assist Soldier as needed in obtaining legal assistance (Formal board).
- Provide TDY orders for travel to formal PEB hearing.
- Assist with obtaining retirement orders or separation orders.
- Process Soldier promptly.

What about confidentiality?

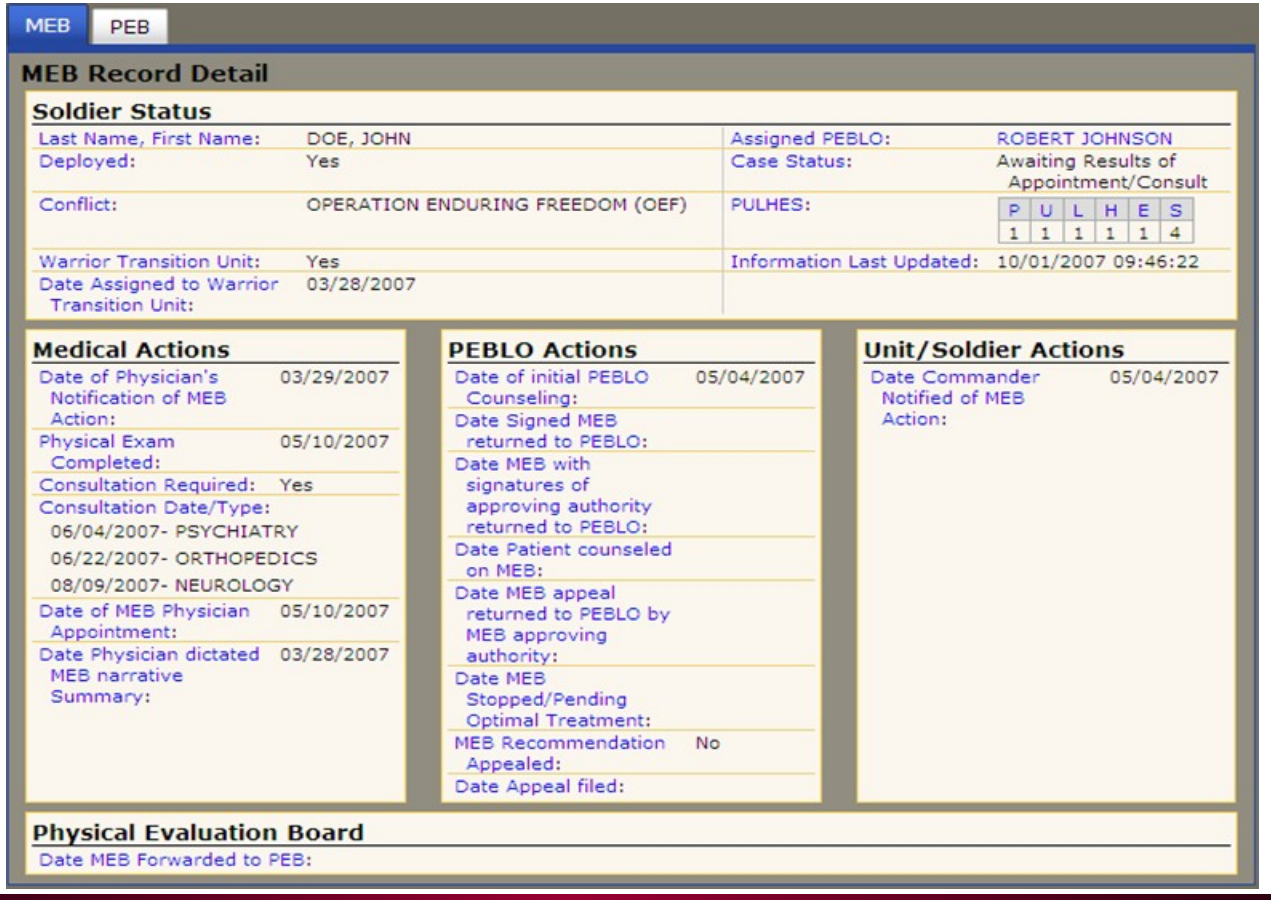
- **A Soldier's medical board is personal and private.**

- **Limited information can be provided to their unit:**
  - **THE FACT THAT A SOLDIER IS UNDERGOING DISABILITY PROCESSING**
  - **WHERE THE SOLDIER IS IN THE BOARD PROCESS**
  - **WHETHER THE SOLDIER WAS FOUND FIT OR UNFIT**
- **Family members do not have automatic access to the Soldier's medical records/board status without their written permission.**
- **<u>HIPAA LAW: NEED TO KNOW / MINIMUM NECESSARY COMMAND DISCLOSURES ALLOWABLE ACCORDING MISSION REQUIREMENTS</u>**

Commanders & 1SGs MEB/PEB Briefing

EACH SOLDIER will also be able to track their progress of their MEB/PEB via the My MEB Portal on AKO. If they have any questions about the data they see in the My MEB Portal, we ask that they please contact their MEB Counselor

My MEB/PEB Portal https://www.us.army.mil/suite/page/4171



MEB | PEB

MEB Record Detail

Soldier Status

Last Name, First Name:	DOE, JOHN	Assigned PEBLO:	ROBERT JOHNSON
Deployed:	Yes	Case Status:	Awaiting Results of Appointment/Consult
Conflict:	OPERATION ENDURING FREEDOM (OEF)	PULHES:	P U L H E S 1 1 1 1 1 4
Warrior Transition Unit:	Yes	Information Last Updated:	10/01/2007 09:46:22
Date Assigned to Warrior Transition Unit:	03/28/2007		

Medical Actions

Date of Physician's Notification of MEB Action:	03/29/2007
Physical Exam Completed:	05/10/2007
Consultation Required:	Yes
Consultation Date/Type:	06/04/2007- PSYCHIATRY 06/22/2007- ORTHOPEDICS 08/09/2007- NEUROLOGY
Date of MEB Physician Appointment:	05/10/2007
Date Physician dictated MEB narrative Summary:	03/28/2007

PEBLO Actions

Date of initial PEBLO Counseling:	05/04/2007
Date Signed MEB returned to PEBLO:	
Date MEB with signatures of approving authority returned to PEBLO:	
Date Patient counseled on MEB:	
Date MEB appeal returned to PEBLO by MEB approving authority:	
Date MEB Stopped/Pending Optimal Treatment:	
MEB Recommendation Appealed:	No
Date Appeal filed:	

Unit/Soldier Actions

Date Commander Notified of MEB Action:	05/04/2007

Physical Evaluation Board

Date MEB Forwarded to PEB:

Soldier's Responsibilities

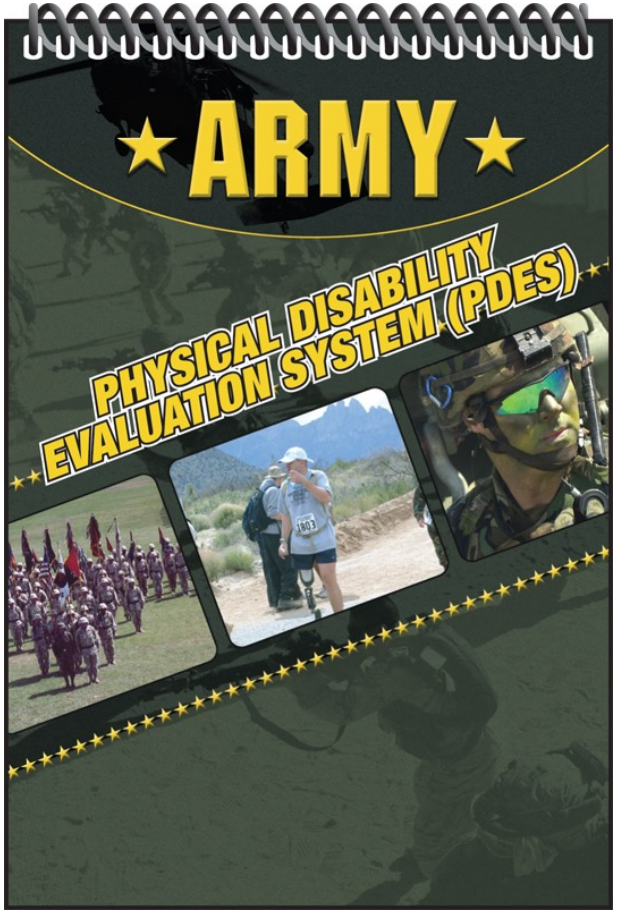
- **The Soldier must NOT miss any of their appointments – They need to be on time, with their ID card, in the appropriate Uniform, and have medical records in hand.**

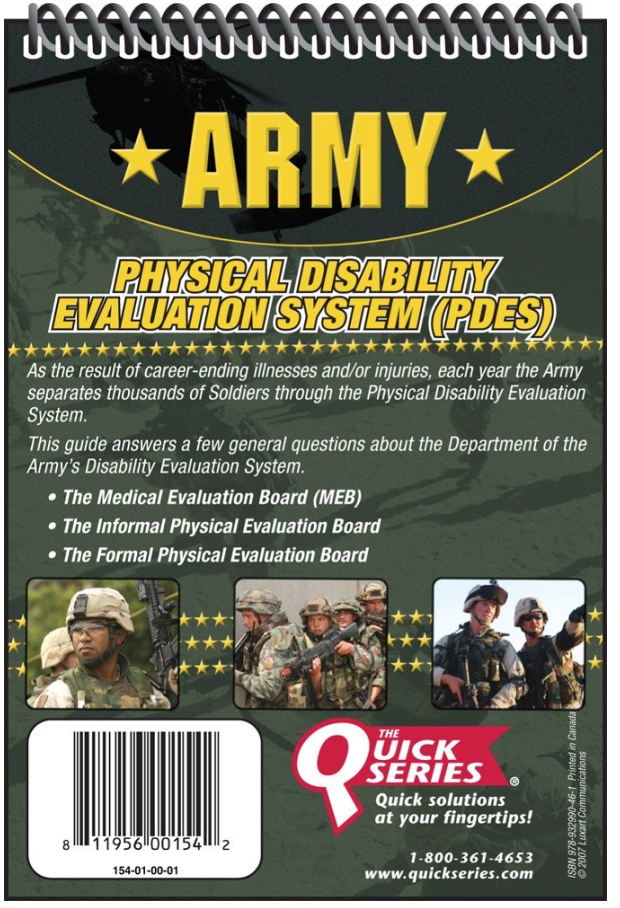
- **NO SHOWS FOR ANY MEDICAL APPOINTMENT WILL BE REPORTED TO THEIR COMMANDER –causes delays in the MEB Process, causes fellow soldiers to not be able to book the appointment, and wastes medical resources. (equates to $85.00 per visit)**

- **The Soldier must always provide accurate phone numbers to their MEB Counselor.**

- **Changes in units/assignments, must be relayed to the MEB Counselor.**

Each Soldier will get a copy of this handbook at the conclusion of their briefing. Please refer to it for more detailed information. We also tell them to feel free to contact their MEB Counselor if they have any questions.




ARMY
PHYSICAL DISABILITY EVALUATION SYSTEM (PDES)
As the result of career-ending illnesses and/or injuries, each year the Army separates thousands of Soldiers through the Physical Disability Evaluation System.
This guide answers a few general questions about the Department of the Army's Disability Evaluation System.
• The Medical Evaluation Board (MEB)
• The Informal Physical Evaluation Board
• The Formal Physical Evaluation Board
THE QUICK SERIES
Quick solutions at your fingertips!
1-800-361-4653
www.quickseries.com

Do You Have Any Questions About the MEB/PEB Process?

WHAT IS E-PROFILE?

e-Profile tracks Soldiers who have a temporary or permanent condition that may render them medically not ready to deploy

-Provides fully automated profile process, from DA Form 3349 entry to routing final profile to Commander

-Standardizes profiling process

-Uses smart logic to complete DA Form 3349, including PULHES determination

-Provides view of active and historical profiles

-Eliminates duplicate entry and pocket profiles

-Automatically updates MEDPROS and the Total Army Personnel Data Bases (TAPDB)

What will e-Profile do for you?

Unit Commanders:

- Provides visibility of health and Profile status of your Soldiers
- Increases communication between you and the Providers
- Helps ensure your Soldiers get corrective intervention, either medical care or board process

Providers / Army Medical Community:

- Provides profile standardization and quality control (less returned profiles!)
- Provides fully automated profile process, from DA 3349 entry to routing
- Provides view of historical and active profiles (including draft profiles)

Plus –

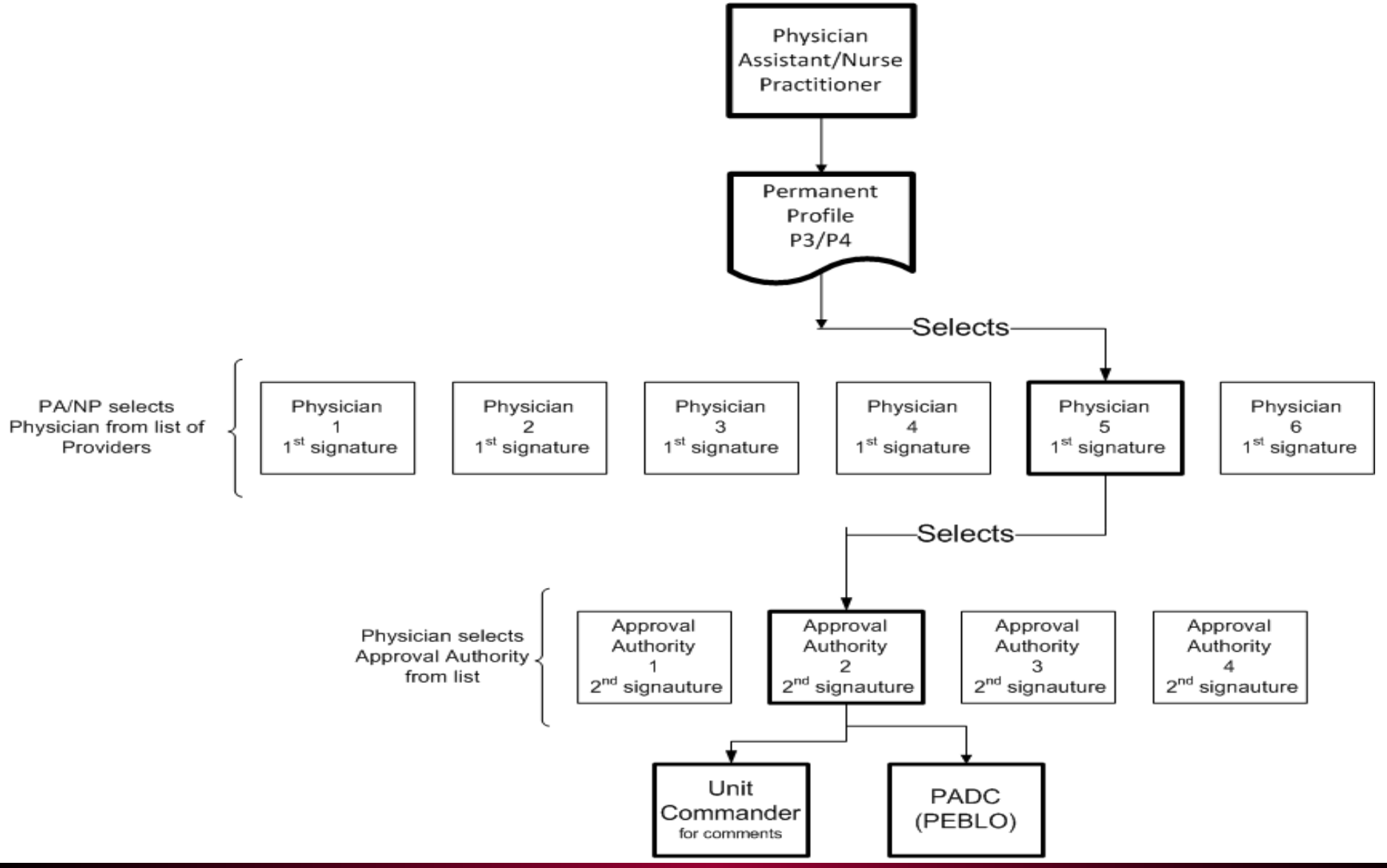
- Automatically updates MEDPROS and personnel systems (TAPDBs) for determining medical readiness and assignment limitations (no dual entry!)

User Roles

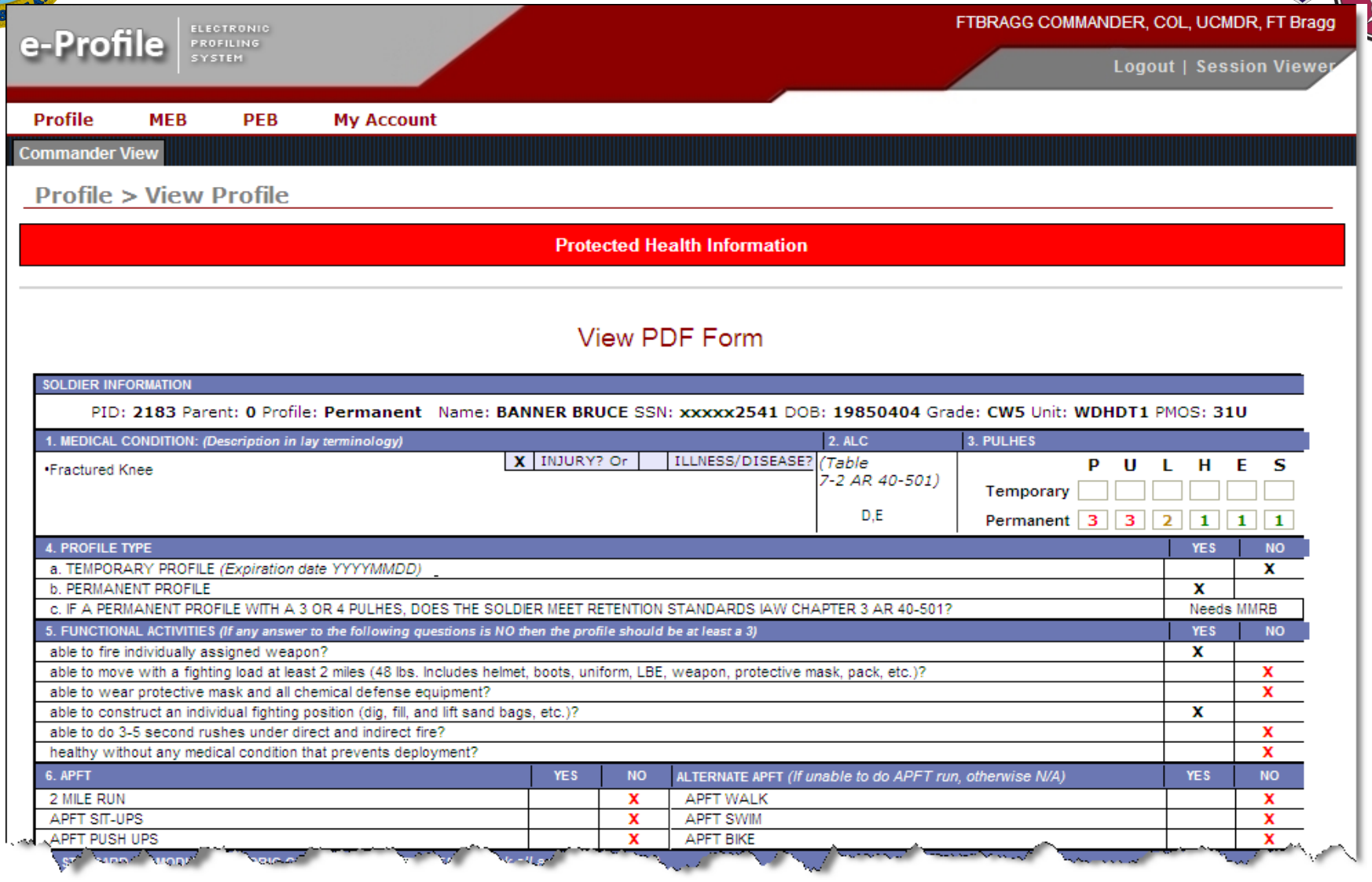
Unit Commander (UCMDR)	**MEB**	
	View Soldier details	View MEB Results.
	PEB	
	View Soldier details	View PEB Results.
	Profile	
	View existing	View existing Profiles for Soldiers.
	Enter commander comment	Provide commander comments for a Profile.
Company Commander Clerk	**MEB**	
	View Soldier details	View MEB Results details.
	PEB	
	View Soldier details	View PEB results details.
	Profile	
	View existing	View existing Profiles for Soldiers.
	Reports	
	View MEB	View MEB Report by location.
	View PEB	View PEB Report by location.

e-Profile is a Role Based system

e-Profile Routing



Commanders & 1SGs MEB/PEB Briefing



e-Profile ELECTRONIC PROFILING SYSTEM

FTBRAGG COMMANDER, COL, UCMDR, FT Bragg

Logout | Session Viewer

Profile MEB PEB My Account

Commander View

Profile > View Profile

Protected Health Information

View PDF Form

SOLDIER INFORMATION

PID: **2183** Parent: **0** Profile: **Permanent** Name: **BANNER BRUCE** SSN: **xxxxx2541** DOB: **19850404** Grade: **CW5** Unit: **WDHDT1** PMOS: **31U**

1. MEDICAL CONDITION: *(Description in lay terminology)*				2. ALC	3. PULHES						
•Fractured Knee	X	INJURY? Or		ILLNESS/DISEASE?	*(Table 7-2 AR 40-501)* D,E		P	U	L	H	E	S
						Temporary						
						Permanent	3	3	2	1	1	1

4. PROFILE TYPE	YES	NO
a. TEMPORARY PROFILE *(Expiration date YYYYMMDD)*		X
b. PERMANENT PROFILE	X	
c. IF A PERMANENT PROFILE WITH A 3 OR 4 PULHES, DOES THE SOLDIER MEET RETENTION STANDARDS IAW CHAPTER 3 AR 40-501?	Needs MMRB	

5. FUNCTIONAL ACTIVITIES *(If any answer to the following questions is NO then the profile should be at least a 3)*	YES	NO
able to fire individually assigned weapon?	X	
able to move with a fighting load at least 2 miles (48 lbs. Includes helmet, boots, uniform, LBE, weapon, protective mask, pack, etc.)?		X
able to wear protective mask and all chemical defense equipment?		X
able to construct an individual fighting position (dig, fill, and lift sand bags, etc.)?	X	
able to do 3-5 second rushes under direct and indirect fire?		X
healthy without any medical condition that prevents deployment?		X

6. APFT	YES	NO	ALTERNATE APFT *(If unable to do APFT run, otherwise N/A)*	YES	NO
2 MILE RUN		X	APFT WALK		X
APFT SIT-UPS		X	APFT SWIM		X
APFT PUSH UPS		X	APFT BIKE		X

The Commander can review the profile via the View Profile or by selecting View PDF Form

Commander Responsibilities

- Register for access to e-profile.
- View Soldiers profiles in e-profile
- Designates personnel for e-Profile roles.
- Restrict authorized users to those with a valid need for access to protected health information.

Do You Have Any Questions About the eProfile?

IDES Overview

IDES Concept

An integrated DoD and VA disability system that eliminates the duplicative, time-consuming, and often confusing elements of the two current disability processes of the departments…

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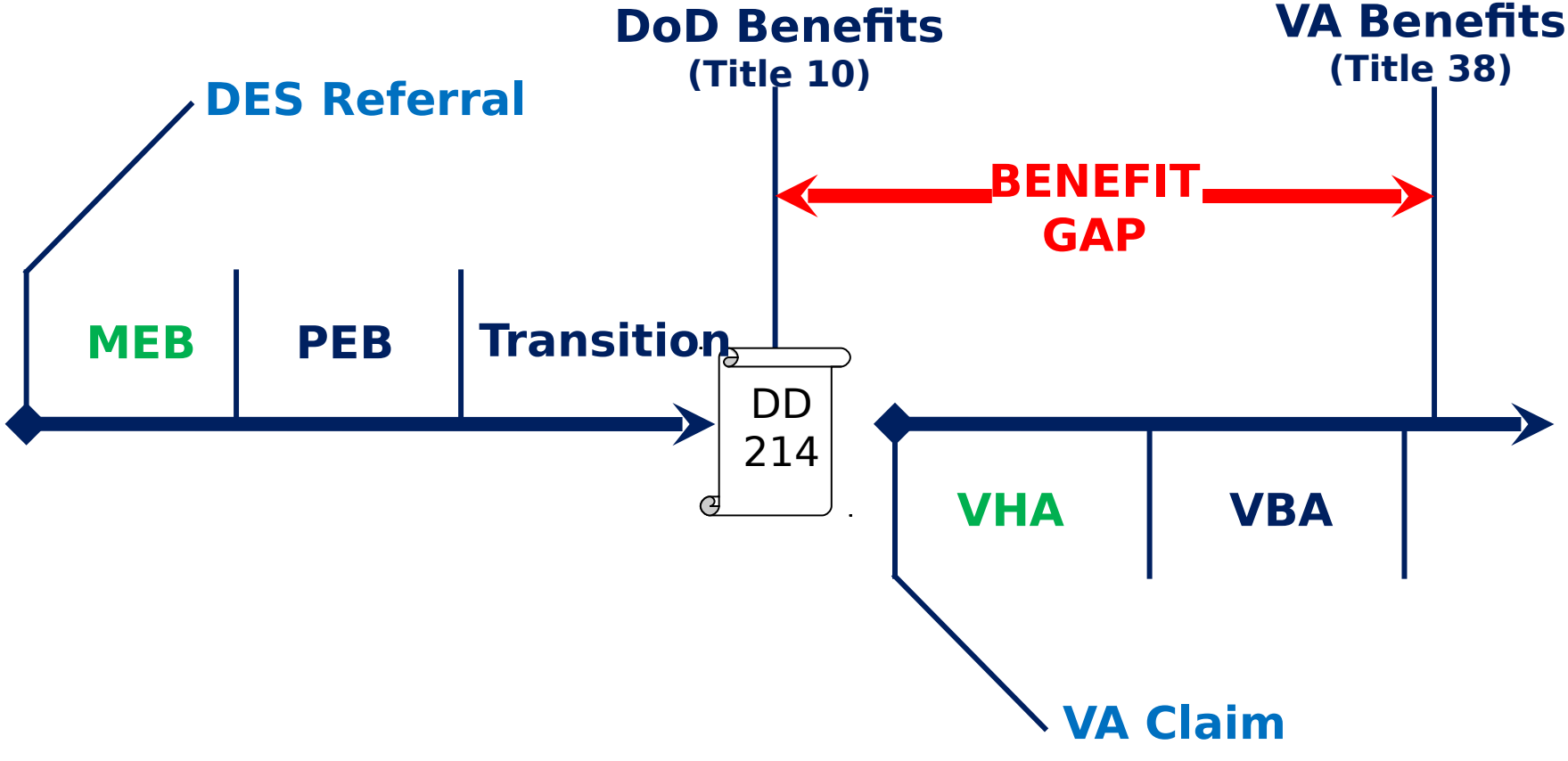
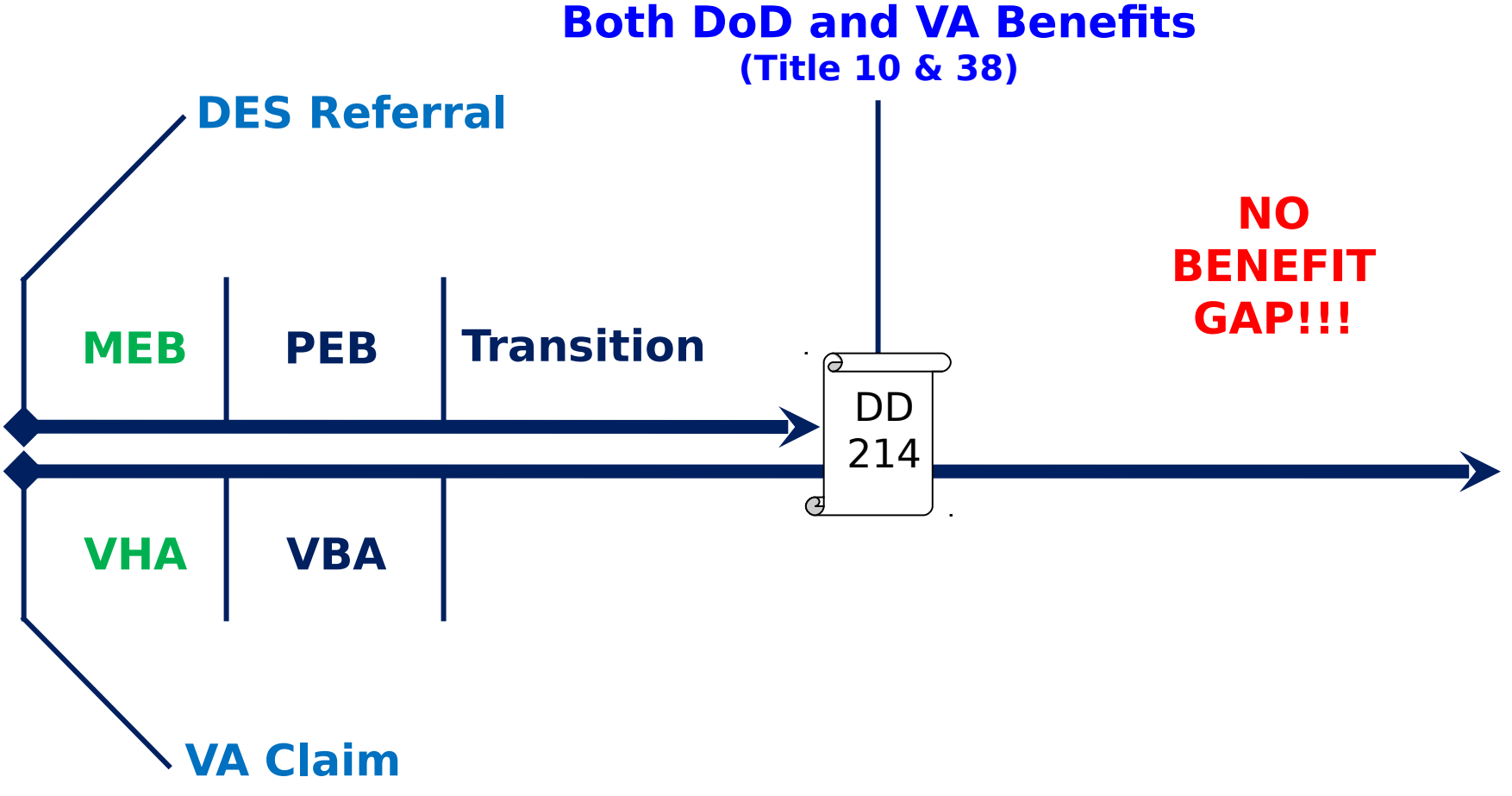
DES Pilot (IDES) Strategic Overview

The *Legacy* Process



IDES (DES Pilot) Strategic Overview

The *NEW* Process

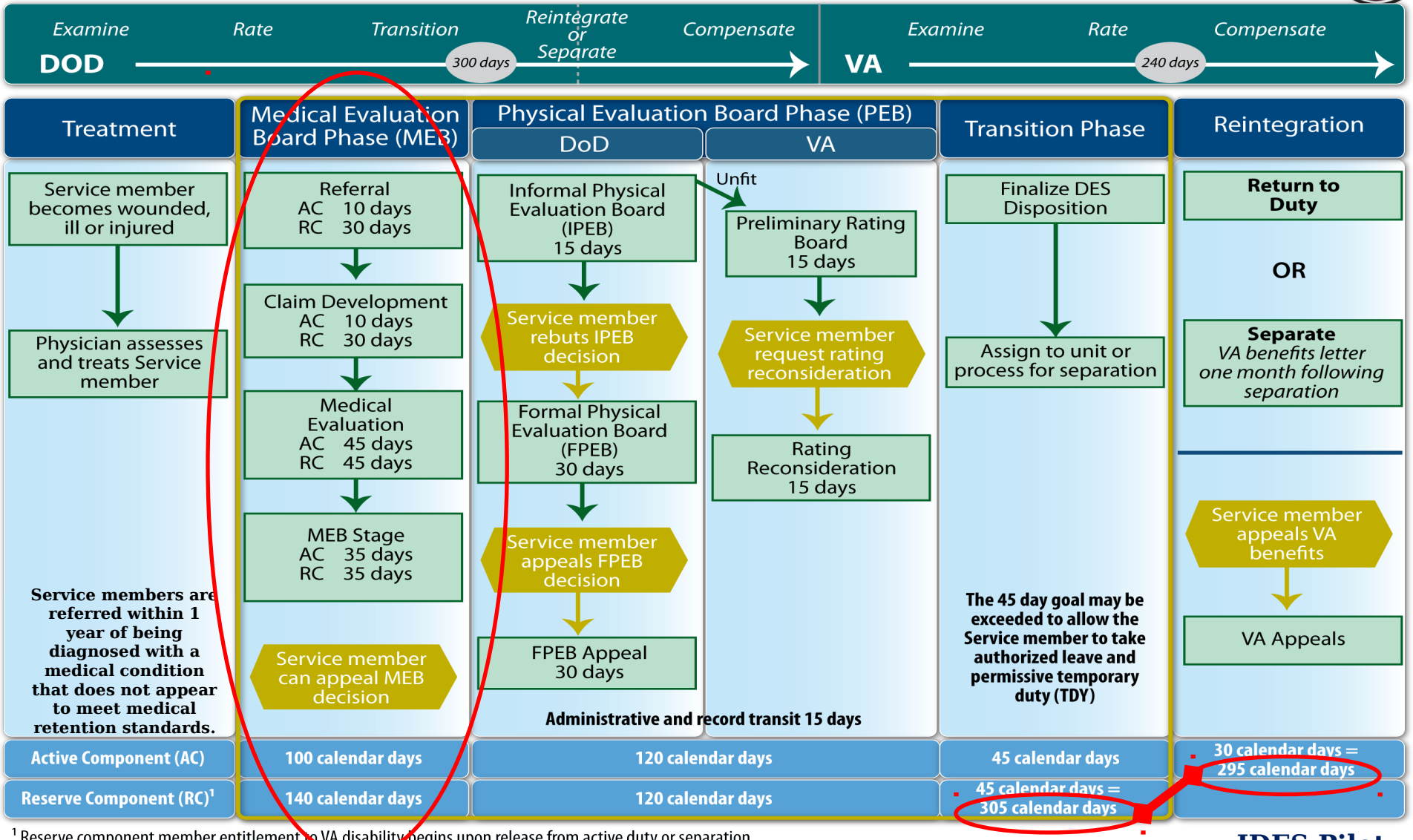


IDES Timeline

Phase I	Phase II	Phase III	Phase IV	Phase V	Phase VI
MEB Referral Stage	VA Claim Development Stage	VA C&P Medical Evaluation Stage	MEB-NARSUM Stage	(IPEB) / Preliminary Rating Board	Transition /Awaiting Orders
10	10	45	35	30	45-90

Phase I	PEBLO Conduct Counseling, Complete Section 1 of VA/DOD Claim, provide Military Service Coordinator (MSC) a copy of SM's DES (Disability Evaluation System) case and a copy of the SM medical record.
Phase II	MSC counsels SM, complete of VA Claim Form 21-0819 , request C&P exam appts. Provide appt dates to PEBLO. Continues to counsel SM on VA benefits during process.
Phase III	C&P exam performed by DVA/VBA/DoD provider. MSC downloads the completed C&P exam results from the Capri System. C&P exam report given to PEBLO.
Phase IV	C&P results and complete MEB package provided to MEB provider. NARSUM completion, MEB conducted. SM counseled on MEB findings. (Concur/appeal/Impartial Medical Review)
Phase V	Date the PEBLO (Physical Evaluation Board Liaison Officer) forwards the SM's DES case file to the PEB (Physical Evaluation Board) at Fort Lewis for IPEB (Informal Physical Evaluation Board). **Fit/Unfit** determination by PEB. Request for ratings from VA–DRAS if SM found unfit. SM counseled by PEBLO on findings. (Concur/Formal/Reconsideration if applicable).
Phase	Waiting on Transition (RTD or Separation Orders). DD 214 provided to MSC for VA

Commanders & 1SGs MEB/PEB Briefing

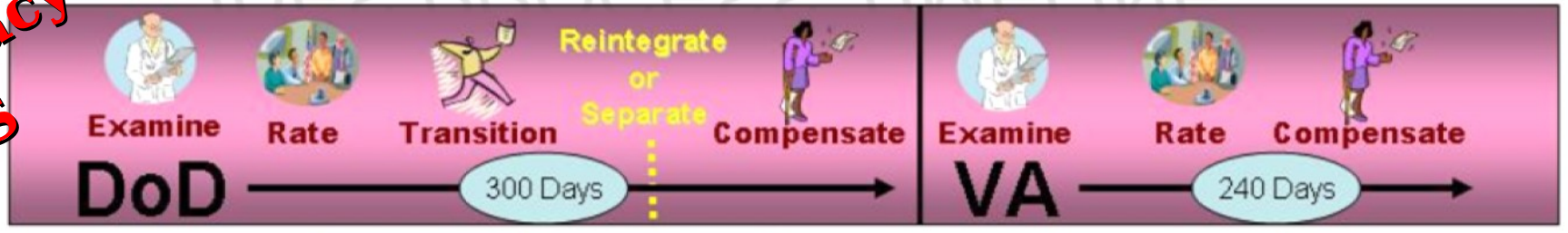


[1] Reserve component member entitlement to VA disability begins upon release from active duty or separation

IDES Pilot
295 Days

IDES PROCESS TIMELINE

Legacy DES



IDES

Treatment	MEB	PEB	VA Rating	Transition	Reintegrate
Service member is wounded, ill, or injured Physician assesses and treats Service member Up to 1 Year	Referral (10 days AC) (30 days RC) Claim Development (10 days AC) (30 days RC) One Physical Physical Exam (45 days) Evaluation Board (35 days)	Informal Board (15 days) Formal Board (30 days) Appeal (30 days) Admin and Record transit (15 days)	Single Rating Agency Proposed Rating (15 days) Rating Reconsideration (15 days)	Seamless Transition Finalize DES Disposition Process to Unit or for separation	Return to Duty OR Separate VA benefits letter one month following separation VA Appeals

GOAL

Active Component	100 days	120 days	45 days	30 days (295)
Reserve Component[1]	140 days	120 days	45 days (305)	

1. Reserve Component member entitlement to VA disability compensation begins upon release from active duty or separation.

Be your own Subject Matter Expert!!

- Become familiar with the PPES/APDES/IDES.
- Educate leaders and Soldiers on PPES/APDES/IDES.
- Refer Soldier to MTF for evaluation if unable to perform duties.
- Provide statements, info, records to S-1/G-1/MTF for Soldiers undergoing MMRB/MEBs in a timely manner.
- Complete LODI when Soldier is injured.
- Make appropriate entries in Enlisted/Officer records (ERB,ORB).
- Assign Soldier to duties commensurate with the physical profile and recorded assignment limitations.
- **Communicate profile questions/concerns with Soldier's physician.**
- **Review all temporary profiles**
  - **Soldier should not remain on temp profile longer than 1 year total (90 days at a time)**
  - **Commander can request evaluation through Soldier's Primary Care Manager (PCM)**

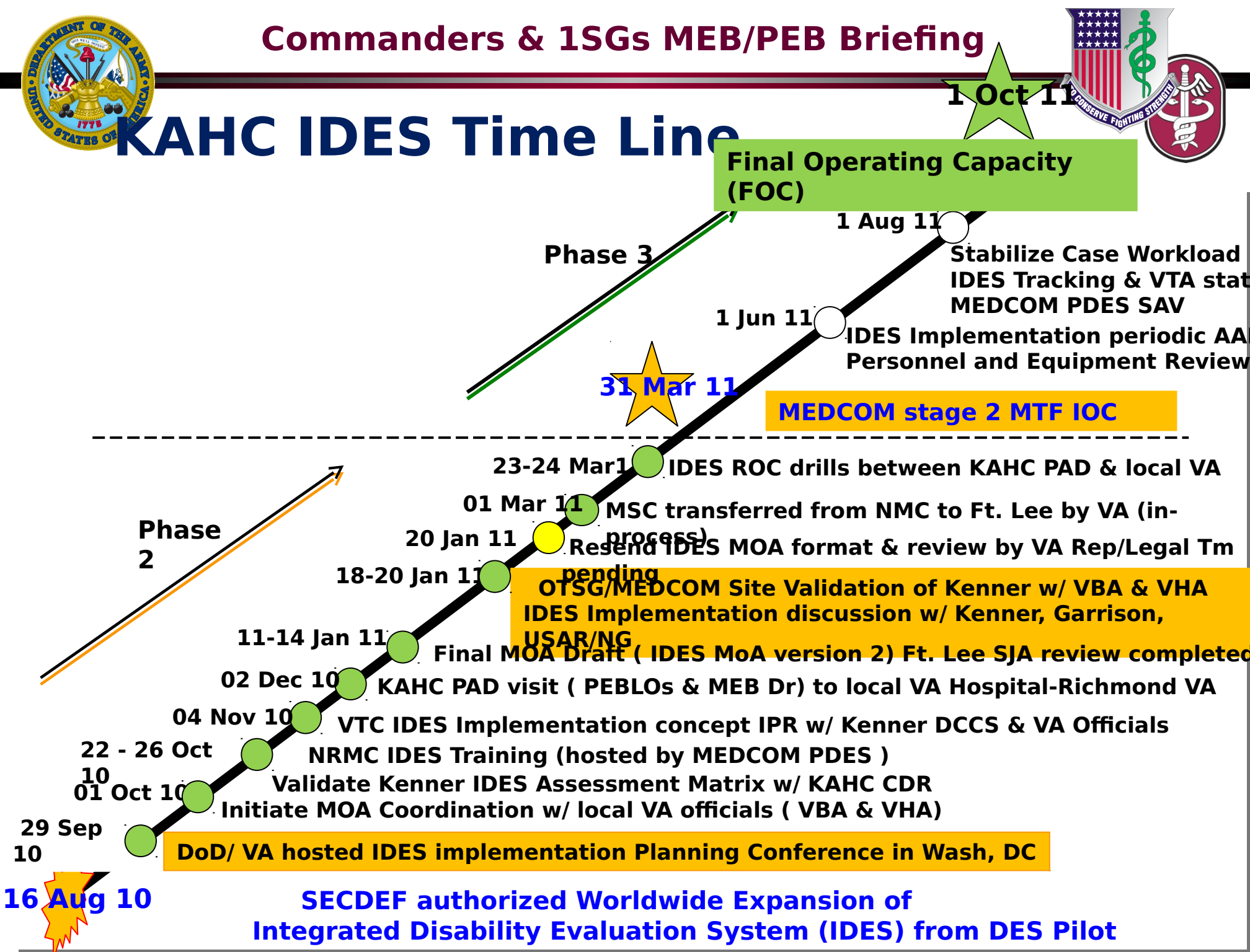
MEB / IDES Staff

- PEBLO 804-734-9319 / 9349
- Contact Rep 804-734-9545 / 9706
- VA MSC 804-734-9096
- eProfile 804-734-9567 / 9292
- Chief, PAD 804-734-9314 / 9262 / 9299

MEB Office Hours of Operation

8:00 am - 4:00 pm

KAHC IDES Time Line


1 Oct 11
Final Operating Capacity (FOC)
1 Aug 11
Phase 3
Stabilize Case Workload
IDES Tracking & VTA stat
MEDCOM PDES SAV
1 Jun 11
IDES Implementation periodic AA
Personnel and Equipment Review
31 Mar 11
MEDCOM stage 2 MTF IOC
23-24 Mar11
IDES ROC drills between KAHC PAD & local VA
01 Mar 11
MSC transferred from NMC to Ft. Lee by VA (in-process)
20 Jan 11
Resend IDES MOA format & review by VA Rep/Legal Tm pending
18-20 Jan 11
OTSG/MEDCOM Site Validation of Kenner w/ VBA & VHA
IDES Implementation discussion w/ Kenner, Garrison, USAR/NG
Phase 2
11-14 Jan 11
Final MOA Draft (IDES MoA version 2) Ft. Lee SJA review completed
02 Dec 10
KAHC PAD visit (PEBLOs & MEB Dr) to local VA Hospital-Richmond VA
04 Nov 10
VTC IDES Implementation concept IPR w/ Kenner DCCS & VA Officials
22 - 26 Oct 10
NRMC IDES Training (hosted by MEDCOM PDES)
01 Oct 10
Validate Kenner IDES Assessment Matrix w/ KAHC CDR
Initiate MOA Coordination w/ local VA officials (VBA & VHA)
29 Sep 10
DoD/ VA hosted IDES implementation Planning Conference in Wash, DC
16 Aug 10
SECDEF authorized Worldwide Expansion of
Integrated Disability Evaluation System (IDES) from DES Pilot

References

- Title 10 U.S.C., Chapter 61
- Department of Defense Directive 1332.18
- DOD Instruction 1332.38
- DOD Instruction 1332.39
- Veterans Administration Schedule for Rating Disabilities (VASRD)
- AR 600-8-4 Line of Duty Policy Procedures and Investigations
- MILPER Message 04-096 Disability Processing for Mobilized Reserve Component (USAR and ARNG) Soldiers, to Include RC Soldiers on Active Duty Medical Extension

References

- AR 600-60 (Physical Performance Evaluation System)
- AR 40-501 (Standards of Medical Fitness)
- AR 40-400 (Patient Administration)
- AR 635-40 (Physical Evaluation for Retention, Retirement, or Separation)
- AR 40-66 (Medical Record Administration and Health Care Documentation)
- U.S. Army Physical Disability Agency Website https://www.hrc.army.mil/site/active/TAGD/Pda/pdapage.htm
- U.S. Medical Command Patient Administration Website https://pad.amedd.army.mil/meb.html

Questions?

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Chief, Patient Administration

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Deputy Chief, PAD

SSG Leroy Otis
NCOIC, PAD